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IDWR / NORTHIN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLSIN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

ID Number: 95-16864Date Received: 9/5/14Receipt No: N030732Amount: \$25.00 By: cb

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For domestic and/or stockwater purposes where
daily use is less than 13,000 gallons per day

Please type or print clearly

- Name of claimant(s) Janet Heine Phone 664-6256
Mailing address 1 Stella Creek CdrA, ID ZIP 83814
Street or Box City State
- Date of priority (only one (1) per claim) 12/31/92
Month/Day/Year (yyyy)
- Source of water supply (check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 50N, Range 02W, Section 16,
NE 1/4 of NW 1/4, or Govt. Lot _____, B.M., County of Heaven
Parcel (PIN) no. 50N 02W 16 2750
Additional points of diversion, if any: NONE
If available, GPS coordinates N/A
- Description of diverting works (wells, pumps, spring boxes, pipelines, etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.
submersible pump in well
- Water is claimed for the following: (Limited to domestic and/or stockwater uses. See page 1 of the instructions.)
For domestic purposes from 1/1 to 12/31 amount 0.04 cfs ☒ AFY ()
For stock water purposes from 1/1 to 12/31 amount 0.02 cfs ☐ AFY ()
7. Total quantity claimed 0.04 cfs ☒ or AFY ()
8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): 1 home; lawn & garden
stock water for 5 head of mixed

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9. Location of place of use is: Township 50N, Range 02W, Section 16, NE 1/4 of 1/4,
or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) _____

For (check one) Domestic () Stock () Domestic and Stock (☒)

Additional places of use, if any: NONE

10. In which county(ies) are lands listed above as place of use located? Kootenai

11. Do you own the property listed above as place of use? Yes (☒) No ()
If your answer is no, describe in remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None (☒)

13. Remarks:

14. Basis of claim (check one) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable, provide IDWR water right number _____

15. Signature(s)

a. By signing below, I/we acknowledge that I/we have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication".

b. I/We do () do not (☒) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 2

For individuals:

I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of claimant(s) Janet Heine Date: 9/5/14

Date: _____

For organizations:

I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of authorized agent _____ Date _____

Title and organization _____

16. Notice of appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

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50N02W16NEV1

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SEP 8 2004

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

SEP 05 2014

IDWR / NORTH

1. WELL OWNER Name <u>Jim Payne</u> Address <u>41445 Stella Creek Road</u> Owner's Permit No. <u>Coeur d'Alene Idaho</u>		7. WATER LEVEL Static water level <u>25</u> feet below land surface. Flowing? ☐ Yes ☐ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____ Describe artesian or temperature zones below.																																			
2. NATURE OF WORK <u>95-86-N-26</u> ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____ Discharge G.P.M. <u>18</u> Pumping Level <u>WITH AIR</u> Hours Pumped <u>2 hr</u>																																			
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>7</td><td>TOP SOIL</td><td></td><td>X</td></tr><tr><td>8</td><td>7</td><td>50</td><td>BOULDERS GRAVEL CLAY</td><td>X</td><td></td></tr><tr><td>6</td><td>50</td><td>95</td><td>SAND COBBLED CLAY CONTAIN</td><td>X</td><td></td></tr><tr><td>6</td><td>95</td><td>115</td><td>SAND GRAVEL</td><td>X</td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	7	TOP SOIL		X	8	7	50	BOULDERS GRAVEL CLAY	X		6	50	95	SAND COBBLED CLAY CONTAIN	X		6	95	115	SAND GRAVEL	X	
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		RECEIVED JUL 25 1986 Department of Water Resources Northern District Office																																			
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ inches Diameter _____ inches From _____ feet To _____ feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>25</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port _____		RECEIVED AUG 7 1986 Department of Water Resources																																			
6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td>X</td><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td></td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr></table> County <u>Boonville</u> Subdivision Name _____ Lot No. _____ Block No. _____ NE 1/4 NW 1/4 Sec. <u>16</u> T. <u>50</u> N. R. <u>2</u> E. (W)		N						X				W				E											11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H & D</u> Firm No. <u>448</u> Address <u>552 W. Highway</u> Date <u>7-22-86</u> Signed by (Firm Official) <u>John Wheeler</u> and (Operator) <u>Clarence Shultz</u>										
N																																					
	X																																				
W				E																																	